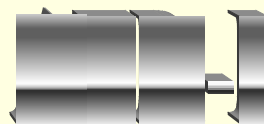


# State of Idaho



Access to Recovery Idaho

Grant TI16826

# Target Population

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- Underserved Adults and Adolescents
  - Hispanics
  - Native Americans
  - Rural and Frontier
  - Statewide
  
- Enhance Choices Available to Current Initiatives
  - Prisoner re-entry
  - Drug courts
  - Child Welfare
  - Co-occurring SA / MH

# Target Population

Level of Care	Current Beds	Current Clients Served	ATR-I Beds	ATR-I Clients Served	Total Clients (Current/ATR-I)
<b>Adult</b>					
Social Setting Detox	5	455	10	910	1365
Medical Detox	0	0	2	244	244
Residential Treatment	21	252	19	228	480
Halfway House	0	0	n/a	96	96
Outpatient	n/a	4434	n/a	2217	7131
<b>Adolescent</b>					
Residential	19	152	19	152	304
Transition Houses	n/a	0	n/a	96	96
Outpatient	n/a	970	n/a	485	1455

# Ensuring Client Choice

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- Increase Clinical Treatment Provider Pool
  - Recruit providers that have not participated in the past
    - Faith-based
    - Tribal
    - Bilingual, especially Hispanic
    - Other
- Develop system of Recovery Support Providers
  - Faith-based
  - Tribal
  - Bilingual, especially Hispanic
  - Other

# Ensuring Client Choice

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- Develop system of Recovery Support Providers
  - Faith-based
  - Tribal
  - Bilingual, especially Hispanic
  - Other
  
- Establish *Portal to Recovery*
  - Inform community about ATR-I services
  - Provide self-screening
  - Link client to professional screening providers
  
- Provide client with list of treatment and recovery support providers from which to choose

# Assessment / Screening Process

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- *Portal to Recovery*
  - Access Advocates
  - Self-screening
  - Link to professional screener
  
- Management Services Contractor (MSC) / Care Management
  - Professional screener
    - Clinical Eligibility
      - Risk assessment
      - DSM-IV-TR diagnosis
    - Financial Eligibility
    - Recommend initial recovery support services as appropriate
    - Client given choice of assessment and recovery support service providers
    - Voucher issued for Assessment and, as appropriate, recovery support services

# Assessment / Screening Process

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- Assessment Provider
  - Receives notification of voucher
  - Schedules client appointment
  - Conducts assessment
    - Bio-psycho-social-cultural assessment
    - Drug and alcohol use history
    - DSM-IV-TR diagnosis
    - ASAM PPC2R to determine level of care
    - Recommend initial recovery support services
    - Client given choice of treatment and recovery support service providers
    - Assessment summary submitted to MSC for approval for continued treatment and/or recovery support services

# Assessment / Screening Process

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- Management Services Contractor
  - Issues voucher to client-chosen treatment and/or recovery support service provider
  - Refers client to client-chosen treatment and/or recovery support service provider
  - Issues vouchers for case management, transportation, and child care as needed



# Referral Process

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- Management Services Contractor
  - Refers client to client-chosen treatment and/or recovery support service providers
  - Manages network of treatment and recovery support service providers
  - Transmits voucher information to providers electronically
  - Transmits diagnostic summary to treatment providers electronically
  - Notifies referral source (e.g. probation officer, advocate) as appropriate or authorized by client

# Tracking Vouchers/Clients

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- Managed by Management Services Contractor
- Unique Client ID
  - Consistent through all levels and episodes of care for clinical treatment and recovery support services
- Unique Provider ID
- Voucher
  - Unique Voucher Number
  - Cap on authorized service type, number of sessions, amount of money
  - Re-authorization required for continued services and/or changes to services
  - Time sensitive

# Tracking Vouchers/Clients

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- Incentives for providers to submit data required for tracking
  - Holdback of 10% of reimbursement until data is collected
  - Ability to continue to participate as ATR-I provider
  
- MSC submits to SSA
  - Quarterly service data
  - Utilization data with billing
  - Quality Improvement (CQI) reports

# Eligibility for Non-traditional Providers

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## ■ Treatment Providers

- Comply with Idaho Administrative Procedures Act (IDAPA)
  - Rules and Minimum Standards Governing Alcohol / Drug Abuse Prevention and Treatment Programs (16.06.03)
  - Adolescent Residential programs under the jurisdiction of the Child Care Licensing Act and IDAPA (16.06.02)
- Tribal programs approved by the tribes in compliance with MOU between each tribe and the State of Idaho

## ■ Recovery Support Service Providers

- Standards are under development

# Fraud / Abuse Control

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- MSC required by contract to control fraud and abuse
  - Fiscal audits of MSC
  - Care Management file audit
  - MSC required to obtain independent audit
  - Facility Approval for Treatment and Recovery Support providers
- Audits (MSC and/or SSA)
  - Fiscal
    - Practices to be designed with DHW Management Services
    - Assure funds are used for appropriate and intended purposes
  - Service provision
    - Client Record reviews
    - Assure genuine, free and independent choice
  - Random site visits
- Client Satisfaction Surveys

# Services Covered by Vouchers

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- Treatment
  - Adolescent
    - Residential
    - Transition
    - Outpatient
  - Adult
    - Social setting detox
    - Medical detox
    - Residential treatment
    - Halfway house
    - Outpatient
    - Methadone maintenance

# Services Covered by Vouchers

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- Recovery Support Services
  - Case Management
  - Alcohol / Drug Testing
  - Substance Abuse Education
  - Recovery mentoring / coaching
  - Relapse prevention
  - Transition / temporary housing
  - Marriage / family counseling
  - Spiritual support
  - Employment counseling
  - Transportation
  - Child care

# Reporting

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- Require all treatment and recovery support service providers to collect outcome data on the schedule and forms recommended by SAMHSA to meet GPRA requirements
  
- Management Services Contractor will
  - Incorporate the seven GPRA fields and client / service data into their data system
  - Give training and technical assistance to providers to support CQI of outcomes
  - Facilitate reporting of client and service data
  - Issue 'Report Cards' to providers regarding their outcomes reporting and outcomes
  - Report to the SSA



# Reporting

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- SSA will
  - Have reporting requirements built into the performance requirements of the contract with the MSC
  - Require MSC to
    - Monitor provider submission of client and service data
    - Measure data being submitted for validity and reliability
    - Conduct random audits of provider data to test findings reported by ATR-I
  - Report GPRA and client / service data to SAMHSA

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